

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09031

FILED  
Feb 23, 2012  
Secretary of State

**Entity Name:** MOBILE HOME OWNERS OF SUNRISE 31 SOUTH, INCORPORATED

**Current Principal Place of Business:**

SUNRISE MOBILE HOME PARK  
2371 SE HWY 31  
ARCADIA, FL 34266 US

**New Principal Place of Business:**

SUNRISE MOBILE HOME PARK  
2371 SE HWY 31 - LOT 59  
ARCADIA, FL 34266 US

**Current Mailing Address:**

SUNRISE MOBILE HOME PARK  
2371 SE HWY 31 LOT 59  
ARCADIA, FL 34266 US

**New Mailing Address:**

SUNRISE MOBILE HOME PARK  
2371 SE HWY 31 - LOT 59  
ARCADIA, FL 34266 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUBITT, SHARON  
2371 SE HY 31 LOT 59  
ARCADIA, FL 34266 US

**Name and Address of New Registered Agent:**

CUBITT, SHARON A TD  
2371 SE HWY 31 LOT 59  
ARCADIA, FL 34266 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHARON A CUBITT

02/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CRAMPTON, JOHN B  
Address: 2371 SE HWY 31 LOT 54  
City-St-Zip: ARCADIA, FL 34266

Title: TD  
Name: CUBITT, SHARON A  
Address: 2371 SE HWY 31 LOT 59  
City-St-Zip: ARCADIA, FL 34266

Title: SD  
Name: RIPPY, PHYLLIS S  
Address: 2371 SE HWY. 31 LOT 84  
City-St-Zip: ARCADIA, FL 34266

Title: VP  
Name: PIETERICK, MICHAEL  
Address: 2371 SE HWY 31 LOT 80  
City-St-Zip: ARCADIA, FL 34266

Title: D  
Name: MATHEWS, ROBERT  
Address: 2371 SE HWY 31 LOT 37  
City-St-Zip: ARCADIA, FL 34266

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON A CUBITT

TD

02/23/2012

Electronic Signature of Signing Officer or Director

Date